	Y POL	LICE REPOI	RT	Military Police Repo	d	Oste (YYYMMA)	* .	ORI NÚMĚ		SACRC CONTROL NUMBER
THRU:				TO; GENERAL MANAGE AFRC GARMISCH APÓ AE 19082	R		FROM: COMMANDÉ! GARMISCH N APO AE 080	MP STATION		
	Asuainuu				Section I -	Administrat	tion			
1. Report Type: () Informatio () Traffic () Military Of (X) Griminal	rn Mense	3. Evaluation: (X) Founded () Unfound 4a. Complaint (YYYY/MM/D	ed (Dake; {	o. Complaint Receive) In person) 911) CB X) Telephone) Mail	d By:	() S Prose () C Extre- () D Violin	Reason: of Offender oution Decline officen Decline n Refused To perate	ned ed ()	E Juvenile, Custody U Uniounde X Approhor	(Y)YY/MM/DD):
() Complaint 2. Status: (X) Initial () Supplame () Cdr's Acti	ental	2000/01/1 4b. Compleint (24hr.): 9030	Time () Radio) Radio) Crime Stoppers) Alarm) Other leferral by (Specify):		6a, MP Actio () MPI () CID () CMI Au () Traffic () Other		8b. Dete Re (YYYYMM —	MOD)	7, Involvement: () Hete () Domestic () Death () Gang () Traines () Extremist
		Sec	tion il	Offense (For	dditional	offenses, co	mpiete i	DA Form 3	3975-1)	
1a, Offense No		Subject No. wolvement:		1o. Viotim No. involvement:		ocation Code:	10. ()	Attempted Completed	1f. Same O	ffense Data for All Offense Godes () No (Sen 3975-1)
001		2, 3, 1				14				
1g. Offense 1 Code(s):		nse Description SECTION 223,		70 BODILY				e Location Ac DB, ABRAMS		ĸ
5C2B			,				APO AE 09063	.		
2a. Bogin Date (YYYYAMA/DD): 2000/01/19 2b. Begin Time (24tr.): 0016	20	End Dete ryymm/0D): 2006/01/19 End Time thr.): 0026		es of Criminal Activity (Buying/Receiving Cultiveting/Aenu/actur Publishing Distributing/Saffing Exploiting Children	()00 ring/ ()PF ()T1	hrno): Operating/Promot Assisting Posissing/Conoc Iransporting/Impo Using/Consuming	ing/ (ing/ (conting (orting () A UCMJ) B Non-Crit) C State X) D Local) E Foreign) F Federal	minal Fatality	6 Offerider Usad (Check Up To Three); (X) A Alacho () C Computer Equipment () D Druge/Norcotice () N Nat Applicable
	11 Firms 12 Hand 13 Rifle 14 Shot	rm (Unk Typo) gun	()	Whether (F) Fully Autor 20 Knife/Cutting histrur 30 Bhart Object 35 Motor Vehible 50 Polson 90 Explosives	ment ()	Automatic, (M) M 65 Fine/Incendian 70 Narcotics/Dru 85 Asphysiation 90 Other (Specify	y ()	Unknown) 95 Unknown 96 None	f	Burgiary/Houselyeaking Only): Number of Premises Entered. Proble Entry Promible Entry
8. Aggravated A () 1 Argume () 2 Assault Law O () 3 Dring D () 4 Gangle () 5 Juvonili () 6 Domes () 7 Marcy h	oni on flicer ealing nd e Gang tio Quarr	() () () () () () () () () ()	Other Fe 20 Grimine 21 Grimine 30 Gilld P 31 Gun Ck 32 Hunting 33 Other N	heck Up to Two): Iony Involved I Milled By Private Citiza I Milled By Law Enforce Inving With Weapon I Mandan Accident I Mediant I Medi) nemi	Additional Justifiat A A criminal att Comman attu Comm	lacked police ched police o loked a civilla impted flight ad in commis sted arrest	officer and the officer and was of from a crime	et police office killed by and	es killed the criminal other police afficer
10. Blas Motiv	vation (A	la Applicable):	()Ye	s ()No (X)	Unknown					
				Incident Based						
02 8 03 8 04 6 05 0 06 0	SenlyCred Sur/Offloer Church/Sy: Commeric Construction	MCO Glub nagogue/Tomple al Office Building	09 D 10 F 11 G 12 G 13 H	nptiOscount Store(Exchan rug Storen-bepista/Canic etx/Mods/Treining Aroa etx/Prods/Treining Aroa nocery Store/Commissery intraey/Road/Niey/Street oter/Mote/VAG/VEQ/TLQ	16 Laks 17 Liqui 18 Molu 19 Rent 20 Ress	Prison/Corrections F Waterway/Ocean or Pool/Parking Lot/S lel/Storage Facility dence/Ouerters/Ber taurant/Conng Facility	ernge recks/8EQ/80	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	tő Child Care i 18 Rocroston :	: Sintion bre/Concessionaire Facility/Home Day Care Ared/Park Amir/Service School
For use of the AUTHORITY PRINCIPAL I ROUTING US DISCLOSUR	; PVRPOSI SES,	To provide co Your Social S	d States Col mmanders : laculity Num	ncy is ODC80P8 is Section 301; Title & Unit and law enforcement office by is used as an additions Security Number is votunts	is with mosns by: Anternate means	which intolmatics in	ay be accumis	ly dentified	22, 1943 (SSN	(i)
DA FORM 38	1# DE	C 1000	000	4-00-MPC937	DA EDBM 297	75, MAY 88, 13 OF	BOY ETE		••	Page 1 of 10 Pages

		ject (For additional subjec	e completé D	Form 3975-2)	
Cident No. 14h Name (Saction III - Sub- aat, First, Middle Na	ij ect <i>(For</i> additional subjec (R., Sr., III):	1c, SSN/FN	en Reg No:	1 d. Protected identity: ()
4 COMEY.N	VEIL JOSEF	1g. POB: City, State, Country:		1h. Grade 1l. Home	Phone: 1). Work Phone:
Catogory: 15 A Army	OB (YYYYMM/DD):	ZANESVILE, OH US		E-AN	440-2844
C Coast Guard	k, Nicknames/Allas;	Patrician out an		(X)US ()Res	adont Alien
F Air Force	41 - State of Lane 1 House		() Country (S		\ D Daniller / \\/ Donanies
A Marine			1m. Component:) G Nat'l Guard () FR Foreign) R Regular () V Reserves () IT International
N Navy	n. Drivers Lic. Number:		() State (_
) O NOAA) P Femily Member		Oh and A delegand	2b. Installation/		2d. Zip/APO:
) CI Civil Service 2	a. Organization, UIC, And		APO		09963 29, Unit Phone:
) R Civilian) S Contractor	W4RH01 ARMED	FORCES RECREATION	2c. State/Count	'y :	Zij, Unit Filone.
1 T Other Gov. Empl.			3b. Installation/	illy:	3d. Zip/APO:
) U Foreign Nat'l Empl.) V Other Foreign Nat'l	la. Residence Street Addr	995.	GARMISCH		09053
) W Reliced Military	ABRAMS COMPLEX, R	M 285	3c, State/Count	y:	
		() Omi ()	GE Red () White	e (.) Other (9	specify):
Hair Color: (X) Bi		T TOOK	() Hazei (/ Jaloly (
. Eye Color: () Brown		July (X)			
Complexion:	ark () Dark Brn () Fair	(X) Light () Light Bm () Medium	() Modlum Brn () Ruddy () Yello	w () Sallow () Olive
Ape Range (Spacify):	4e, Height: 4	(. Welchit; 3. onweisin.		5, Smt	() Fomale () Unknown
With traube (obsoriate)	74	185		(X) Male	11. Offender's Disposit
Roce	8. Ethnicity	9. Identifying Marks And Local	on:		PROCESSED AND
) A Asian/Pac, Islander	() H Hispanio	NONE VISIBLE			RELEASED
) B Stack) I American tadien!	(X) N Not of Hispania				
Alaskan Native	Origin	10. How Dressed at Time of Ir	cideni (Clothing, Ma	terlais, Colors):	
X)W White)U Unknown	() U Unknown	CIVILIAN ATTIRE			
	() None () Confiden	tial () Secret () Top Sec	et () Other (3	pecify):	
2. Security Clearance: ()		Decise Not Finelized () Legally	Seperated () Ma	ried (X) Bingle () Wildowed
3. Marttel Statue: () Annulis	e () Olygroed () Dr	153, Subject Involvement: 15b. Ar	prehension Type:(X)	Milliary () Surron	der () Clvii Authorities
Subject Armed With (Ch Nhether (F) Fully Automatic	eck up to two And		her (Specify):		
S) Semi-Automatic or (U) U	inknown).			5d. Apprehension P	MO (156, Detention Type: () N Non-Uniformed
X) 1 Unarmed		1/ \ Quillelt		UIC/MPC):	(X) U Uniformed Suc.
) 11 Firearm (Unk Type)	(' ' 20	00/01/18	WCAXAA	
) 12 Hand Gun		151. How Dressed At Time of Appr	UBLERIOL r		
14 Shotgun		CIVILIAN ATTIRE			
) 15 Other Firearm (Sp	ecify Below)				
() 16 Lethal Cutting Insti () 17 Club/Bleokjack/Kni	uokles unkles				
, ,					
		ed Intermality () R Referred to Other Au	horkies 15h. FBI F		15i. FBI Form R-84 Submitt
a manager of Barnes I for	Har 19 Years /) H Handi		() Y	es (X)No) 108 (A) W
5g. Disposition Of Person Uni Specify):	der 18 Years: () H Hendi				
(Specify):	der 18 Years: () H Hendi				
(Specify): 18a involvement: () Alcel					
(Specify): 18e, involvement: () Alcel 18c, illness/injury.	nol () Drug (X) None				
Specify): ide. Involvement: () Alcet 16c. Illness/Injury.	nol () Drug (X) None				
Specify): ide. Involvement: () Alcet 16c. Illness/Injury.	nol () Drug (X) None				
Specify): 184 Involvement () Alcel 18c. Illness/Injury. 18d. Alcohol/Drug Involvem	nol () Onug (X) None sent Remarks;	16b. Alcohol/Drug Tost Re	uts .03%	() Other	
Specify): 184 Involvement () Alcel 18c. Illness/Injury. 18d. Alcohol/Drug Involvem	nol () Onug (X) None sent Remarks;		uts .03%	() Other	
Speally): 18a, Involvement: () Alcel 18c, Illness/Injury. 18d, Alcohol/Drug Involvem 17a, Chemical Test Type:	nol () Onug (X) None sent Remarks;	16b. Alcohol/Drug Tost Re	uts .03%	() Other	
Specify): 18a. Involvement: () Alcel 18c. Illness/Injury. 18d. Alcehol/Drug Involvem 17a. Chemical Test Type: 17b. Drug Type:	nol () Druig (X) None sent Remarks; () Blood Test (16b. Alcohol/Drug Test Res) Breathalyzer () Saliva Test	() Urine Test	() O Other	Depressants
Specify): 18a. Involvement: () Alcel 18c. Illness/Injury. 18d. Alcohol/Drug Involvem 17a. Chemical Test Type; 17b. Drug Type; () A "Crack" Cocaine	nol () Orug (X) None ment Remarks: () Blood Test (() F Marphine () G Oplum) Breathalyzer () Sailva Test () K Other Halkichoge () L Amphetamines/Me	() Urine Test	() O Other () P Other	Drugs
Specify): 18a. Involvement: () Alcel 18c. Illness/Injury. 18d. Alcehol/Drug Involvem 17a. Chemical Test Type; 17b. Drug Type;	nol () Orug (X) None sent Remarks: () Blood Test (() F Marphine () G Oplum () H Other Naro	16b. Alcohol/Drug Tost Ren 16b. Alcohol/Drug Tost Ren 16b. Alcohol/Drug Tost Ren () Saliva Tost () K Other Halluchogle () L Amphetamines/Me otics () M Other Stimulante	() Urine Test	() O Other () P Other () Q Sterio	Drugs ods
Specify): 18a, Involvement: () Alcel 18c. Illness/Injury. 18d. Alcohol/Drug Involvem 17a, Chemical Test Type: 17b. Drug Type: () A "Crack" Cocaine () B Cocaine () C Hashish () D Herion	nol () Orug (X) None ment Remarks; () Blood Test (() F Marphine () G Oplum () H Other Naro () I LSD) Breathalyzer () Sailva Test () K Other Halkichoge () L Amphetamines/Me	() Urine Test	() O Other () P Other () Q Sterio	Drugs
(Specify): 18e. Involvement: () Alcel 18c. Illness/Injury. 18d. Alcehol/Drug Involvem 17a. Chemical Test Type: 17b. Drug Type: () A "Crack" Cocaine () B Cocaine () C Hashish () D Herion I () E Marijuana	nol () Druig (X) None sent Remarks: () Blood Test (() F Morphine () G Oplum () H Other Nero () I LSD () J PCP	16h, Alcohol/Drug Tost Ren 16h, Alcohol/Drug Tost Ren 1 Sailva Test () K Other Halluchoge () L Amphetamhes/Me totics () M Other Stimulante () N Barbiturates	() Urine Test	() O Other () P Other () Q Sterio () U Unkno	Drugs ods
Specify): 18e. Involvement: () Alcel 18c. Illness/Injury. 18d. Alcohol/Drug Involvem 17a. Chemical Test Type: 17b. Drug Type: () A "Crack" Cocaine () B Cocaine () C Hashish () D Herion [) E Marijuana	nol () Druig (X) None sent Remarks: () Blood Test (() F Morphine () G Oplum () H Other Nero () I LSD () J PCP	16b. Alcohol/Drug Tost Ren 16b. Alcohol/Drug Tost Ren 16b. Alcohol/Drug Tost Ren () Saliva Tost () K Other Halluchogle () L Amphetamines/Me otics () M Other Stimulante	() Urine Test	() O Other () P Other () Q Sterio () U Unkno	Drugs ids own Type Orug
Specify): 18a. Involvement: () Alcel 18c. Illness/Injury. 18d. Alcohol/Drug Involvement 17a. Chemical Test Type: 17b. Drug Type: () A "Crack" Cocaine () B Cocaine () C Hashish () D Herion () E Marijuana	nol () Druig (X) None sent Remarks: () Blood Test (() F Morphine () G Oplum () H Other Nero () I LSD () J PCP	16h, Alcohol/Drug Tost Ren 16h, Alcohol/Drug Tost Ren 1 Sailva Test () K Other Halluchoge () L Amphetamhes/Me totics () M Other Stimulante () N Barbiturates	() Urine Test	() O Other () P Other () Q Sterio () U Unkno	Drugs ods own Type Orug ection By Other Law

		Section III - Addition	al Subjects		
1a. Subject No: 1b. Nam	ne (Last, First, Middle Na	(R., Sr., III):	1c. SSN/FN	en Reg No:	1d. Protected Identity: ()
2 LARSO 1e. Category:	N, JONATHAN ONEILL	1.000.00		Throughto:	rd. Protected identity: ()
() A Army	1f. DOB (YYYYMM/DD)	is. to be only, orally, orally.		1h. Grade 1l. Hom	e Phone: 1j. Work Phone:
() C Coast Guard	1k. Nicknames/Alias:	SANDPOINT, ID US	14. 630	NA-3	
() F Air Force () H Public Health	in. Michightes/Alias,			(X)US ()Res	sident Allen
() M Marine			() Country (S		
() N Navy	1n. Drivers Lic. Number		1m. Component:	() G Nat'l Guard (() FR Foreign) R Regular () V Reserves
()O NOAA			() State (() iT International
() P Family Member () Q Civil Service	2a. Organization, UIC, A	nd Street Address:	2b. Installation/0		
(X) R Civilian	1		APO	alty:	2d Zip/APO ⁻ 09053
() S Contractor	W4RH01 ARME	ED FORCES RECREATION	2c. State/Countr	y:	2e. Unit Phone:
() T Other Gov. Empl.			AE	•	Zo. Other Morie.
() U Foreign Nat'l Empl. () V Other Foreign Nat'l	3a. Residence Street Ad	dress:	3b. Installation/C	ity:	3d. Zlp/APO:
() W Retired Military	WAIDHEIM BLDG, RM	A 418	CHIEMSEE		09098
		4.5	3c. State/Countr	y:	
4a. Hair Color: ()	Brown () Blond	() Black () Grav (GE		
4b. Eye Color: (X) Brow			X)Red ()White	, , , , , , , , , , , , , , , , , , , ,	pecify);
4c. Complexion:	n () Black ()	Gray () Blue () Greer	() Hazel () Violet	
	ark () Dark Bro () Fal	r (X) Light () Light Brn () Mediu	m / \ Modium B= / /	CDOMES A SECTION	
4d. Age Range (Specify):	4e. Height:	4f. Weight: 5. Juvenile:	III () IAIAGIRTU RIV (() Sallow () Olive
0 - 0	73	1	Yes (X) No	6. Sex:	
7. Race	8. Ethnicity	9. Identifying Marks And Loc	•	(X) Male () Female () Unknown
() A Asian/Pac. Islander	l	9. Identifying Marks And Loc	ation:		11. Offender's Disposition:
() B Black	() H Hispanic	NONE VISIBLE			PROCESSED AND RELEASED
() I American Indian/ Alaskan Native	() N Not of Hispanic				**************************************
(X) W White	Origin (X) U Unknown	10. How Dressed at Time of	Incident (Clothing, Mater	rials, Colors):	
() U Unknown	(X) C Chikhown	CIVILIAN ATTIRE			
12 Sportiffy Classes ()	()) () () ()				
	() None () Confident	, , , , , , , , , , , , , , , , , , ,	ret () Other (Spec	oify):	
13. Marital Status: () Annulla		rorce Decree, Not Finalized () Legali	y Separated () Marrie	d (X) Single ()	Widowed
14. Subject Armed With (Chi	eck Up To Two And		pprehension Type:(X) Mil		
Whether (F) Fully Automatic,		() Accessory () C	ther (Specify)		(, , , , , , , , , , , , , , , , , , ,
(S) Semi-Automatic or (U) U	nknown):	() Conspiracy	pprehension Date 15d	Apprehension PMO	15e. Delention Type;
(X) 1 Unarmed		(x) Little () () () () () () ()		C/MPC):	() N Non-Uniformed Svc
() 11 Firearm (Unk Type)		() Solicit	00/01/19	WCAXAA	(X) U Uniformed Svc
() 12 Hand Gun () 13 Rifle		15f. How Dressed At Time of Appro	ehension:		
() 14 Shotgun		CIVILIAN ATTIRE			
() 15 Other Firearm (Spec	offy Below)				
() 16 Lethal Cutting Instru	ment				
() 17 Club/Blackjack/Knuc					
(Specify):	r 18 Years: () H Handled	Internally () R Referred to Other Auth			FBI Form R-84 Submitted:
			() Yes	(X) No	() Yes (X) No
16a. involvement: (X) Alcohol	enoN() gurd()	16b. Alcohol/Drug Test Resu	ilts: .07%		
16c. fliness/injury:					
16d. Alcohol/Drug involvement	Remarks				
17a. Chemical Test Type: () Blood Test () B	reathalyzer () Saliva Test	() Urine Test () Other	
17b. Drug Type:					
() A "Crack" Cocaine	() F Morphine	() K Other Hallucinogens		() O Other Depre	ssants
() B Cocalne	() G Oplum	() L Amphetamines/Methe	mphetamines	() P Other Drugs	
() C Hashish () D Herion	() H Other Narcotics () LSD	s () M Other Stimulants () N Barbiturates		() Q Sterlods	_
() E Marijuana	() JPCP	() is parbiturates		() U Unknown Ty	pe urug
17c. Drug Test and Measurem		cubic centimeters, etc.)		17d. Drug Detection B Enforcement Means:	by Other Law () Yes () No
	F	form is a continuation of SECTIO Please attach it to DA Form 3976 w ruse of this form see AR 190-45; the proponer	hen completed.		
	10	PRIVACY ACT STATEM			
AUTHORITY: THI	e 10 United States Code Sec	tion 301; Title 5 United States Code Sec		9397 dated November	22 1943 (SSNI)
PRINCIPAL PURPOSE: To	provide commanders and lav	v enforcement officials with means by wi	nich information may be ac	curately identified	, 1070 (0011).
ROUTINE USES: You	ir Social Security Number is	used as an additional/alternate means o	f identification to facilitate t	iling and retrieval.	
	closure of your Social Securi				
DA FORM 3975-2, DEC 1998	00014-00-MPC	⁹³⁷ FOR OFFICIA	L USE ON	L Y Pag	ge <u>6</u> of <u>10</u> Pages

		Section III - Add	ditional Sul	bjects				
	ne (Last, First, Middle Na RDS, NATHAN THOMA	IR., Sr., III):		1c. SSN/FI	Neg No		1d. Prote	cted identity: ()
1e. Category: () A Army	1f. DOB (YYYY/MM/DD):	1g. POB: City, State, Cou SPOKANE, WA D USUS	•		1h. Grade NA-3	1i Home F		1j. Work Phone:
() C Coasi Guard () F Air Force () H Public Health	1k Nicknames/Alias:				try (Specify):) Reside		L
() M Marine					nent: () G Nat'l C		Regular	() V Reserves
() N Navy () O NOAA () P Family Member	1n. Drivers Lic. Number:				nse () FR For tate (Specify)	reign () IT In	ternational
() Q Civil Service	2a. Organization, UIC, A	nd Street Address:		2b. installat	tion/City:	************	1	2d. Zip/APO:
(X)R Civilian ()S Contractor ()T Other Gov. Empl.	W4RH01 ARME	D FORCES RECREATION		APO 2c. State/C AE	ountry:			09053 2e. Unit Phone:
() U Foreign Nat'l Empl.	3a. Residence Street Add	iress:		3b. installat	tion/City:			3d. Zip/APO:
() V Other Foreign Nat'l () W Retired Military	ANNEX RM #114			3c. State/Co	E			09098
4a. Hair Color: (X)	Brown () Blond	() Black () Gray	() Red	GE	A finite - () (D11 10		
4b. Eye Color: () Brow) Green () Hazel	White () C	Other (Spec	ary).	
4c. Complexion:			<u> </u>					
() Albino () Black () D 4d. Age Range (Specify):		r () Light () Light Brn (4f. Weight: 5. Juvenile		Medium Brn	6. Sex:) Yellow () Sallow	v () Olive
0 - 0	73	185	() Yes	(X) No	(X)Male () Fernale	() Unknown
7. Race () A Asian/Pac. Islander () B Black	8. Ethnicity	9. Identifying Marks A NONE VISIBLE	and Location:					ender's Disposition ESSED AND
() American Indian/ Alaskan Native	() N Not of Hispanic Origin	***					REDEA	
(X)W White	(X)U Unknown	10. How Dressed at T	Time of Inciden	t (Clothing, I	Materials, Colors)):		
12. Security Clearance: ()	X) None () Confident	tial () Secret () 7	Top Secret	() Other	(Specify):			
13. Marital Status: () Annulle					Married (X) Sing	le () Wi	dowed	
14. Subject Armed With (Ch Whether (F) Fully Automatic	eck Up To Two And	15a. Subject Involvement: () Accessory		sion Type:(X) Military ()			Authorities
(S) Semi-Automatic or (U) U (X) 1 Unarmed		() Conspiracy (X) Principle	15c. Apprehe		15d. Apprehens (UIC/MPC):	ion PMO	ı	tention Type: Non-Uniformed Syc
() 11 Firearm (Unk Type)		() Solicit	2000/01/1		WCAXAA	4		Uniformed Svc.
() 12 Hand Gun () 13 Rifle () 14 Shotgun () 15 Other Firearm (Spec () 16 Lethal Cutting Instru	ument	15f. How Dressed At Time of CIVILIAN ATTIRE	of Apprehensio	חכ:				
() 17 Club/Black/ack/Knu- 15g. Disposition Of Person Unde		Internally () R Referred to O	ther Authorities	15h FRI F	orm 249 Submitt	ed: 15i E	BI Form	R-84 Submitted:
Specify):				() Y) Yes	(X) No
6a. Involvement: (X) Alcohol	I () Drug () None	16b. Alcohol/Drug Te	est Results: .0)3% 				
16c. iness/injury: 18d. Alcohol/Drug Involvemen	it Remarks							
17a. Chemical Test Type: (17b. Drug Type:	() Blood Test () B	Breathalyzer () Sallva	Test ()	Urine Test	() Other			
) A "Crack" Cocaine) B Cocaine) C Hashish) D Herion	() F Morphine () G Oplum () H Other Narcotlo () I LSD	() K Other Halluci () L Amphetamine () M Other Stimul () N Barbiturates	es/Methamphet	tamines	() P Ott () Q Ste	ner Depress ner Drugs eriods known Type		
) E Marijuana 7c. Orug Test and Measuren	() J PCP nent (i.e.: parts per million	, cubic centimeters, etc.)				Detection By		
		form is a continuation of S				nt Means: () Y 0S	() No
		or use of this form see AR 190-45, the	e proponent agenc		3			
PRINCIPAL PURPOSE: To ROUTINE USES: Yo	o provide commanders and la our Social Security Number is	ction 301; Title 5 United States 0 w enforcement officials with mea used as an additional/alternate	Code Section 29 ans by which inf	ormation may	y be accurately ide:	ntified	22, 1943 (\$	SSN).
DISCLOSURES: Di	sclosure of your Social Secur 8 00014-00-MPC					Page		of 10 Pages

a. Victim No: 1b. Name				victims, c	complete DA F		-3)	,	
	e (last, First, Midd	dle Nan R., Sr	., 111):		1c. SSN/FN	en Reg No:		1d. Prote	ected Identity: (
e. Category:) A Army	1f. DOB (YYYY	/MM/DD): 1g. P	POB: City, State, Cou	intry:		1h. Grade	ii. Home	Phone:	1j. Work Phone
) C Coast Guard) F Air Force) H Public Health	1k. Nicknames//	Alias:			11. CitIzenship: () Country (St) Resid	ient Alien	
) M Marine					1m. Component: (() V Reserves
) N Navy) O NOAA) P Family Member	1n. Drivers Lic. I	Number:			10. Is License (•	eign	() IT Ir	nternational
) Q Civil Service) R Civilian	2a. Organization	n, UIC, And Street	Address:		2b. Installation/C				2d. Zip/APO:
) S Contractor) T Other Gov. Empl.					2c. State/Country	/: 			2e. Unit Phone:
) U Foreign Nat'l Empl.) V Other Foreign Nat'l	3a. Residence S	Street Address:			3b. Installation/C				3d. Zip/APO:
) W Retired Military					3c. State/Country	/: 			
) F Financial () S S) G Govt. () Oti	Religious Org. Society/Public her aknown	4b. Sex: () Maie () Female () Unknown	4c. Age: () Under 24 Hou () 1-6 Days Old () 7-384 Days O Years Old () Age Range (S	Old	4d. Race () A Asian/Pa () B Black () I American () W White () U Unknown	Indian/Alasi	an Native	•	4e. Ethnicity () H Hispan () N Not of Hispanic Origin () U Unknow
. Blas Motivation: () Yes (Check Applicable Blas')) AA Anti-Athelst/Agnostic) AB Anti-Alaskian Native) AC Anti-American Indian) AD Anti-Arab) AE Anti-Aslan) AG Anti-Bisexual) No	() AH Anti-Blac () Al Anti-Cetho () AK Anti-Fem () AL Anti-Hee () AM Anti-Hisp () AN Anti-Islan () AO Anti-Jewi	olic nale Homosexual prosexual panic mic (Moslem)	() AR Ant () AS Anti () AT Anti () AU Ant () AV Anti	ti-Male Homosexual II-Multi-Raclal Group II-Multi-Religious Grot II-Pacific Islander II-Protestant II-White Iti-Homosexual Bias	ир	()	AZ Anti-Ot BA Anti-Mi BB Anti-Pt	ther Religions ther Ethnicity ental Disability tysical Disability Harassment wn Bias
) AA Spouse () AB Child () AC Sibling () AD Parent () AE Parent-In-Law () AF Step Child () AG Grandparent () AH Step-Parent () AK Grandchild () AV Step-Sibling) AZ Friend) BA Neighbor) BB Com. Law S) BC Acquaintan) BD Baby-Sittee) BE Boy/Girlfrier) BF Child of Boy) BH Former Spo	() Spouse () ce () (baby) () nd () (/Girlfriend ()) BL Homosexual Rela) BN Extended Family) BY Employee) BZ Employer) BZ Stranger) CA Otherwise Known) CB Otherwise Unkno) VO Offender	n (() Accessory () Conspiracy () Principle () Solicit	·	()IP(()LS ()M! ()O! ()TT	Broken Bo ossible In Severe La Minor Inju Major Inju Footh Los Unconscie	ternal ceration iry iry s
a. DD Form 2701 Provided Vio	ictim: () Yes	() No		!	9b. If Not Provided, W	/hy Not? () Declined	()N	ot Required
			(For additional						
Section V - Pera. Person Related	rsons Relate				related to rep	ort, com		A Form	
Section V - Per a. Person Related o Report Number: c. Name (Last, First, Middle	rsons Relate	d To Report	Ivil Authorities (I persons	related to rep	Police () Spon	A Form	3975-4)
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*	S	ection V - Additional	Persons Re	elated To Re	port		
1a. Person Related To Report Number:	2 1b. Status) CivII Authorities	() Complain	t ()Mi	Police	() Sponsor	(X)Witness
1c. Name (Last, First, Midd BARROFET, JORGE DE	le Name, JR., Sr., III): :JESUS		1d. SSN/FNN	I/Allen Reg Na:		ship: (X)US (ry (Specify):) Resident Alien
1f. Category: () A Army	1g. DOB (YYYY/MM/D.	7): 1h. POB: City, State, Cou CHICAGO, IL US	intry;		1i. Grade NA-3	1j. Home Phone:	1k. Work Phone: 4402691
() C Coast Guard () F Air Force	11. Nicknames/Aljas:					1m. Component: () G Nat'l Guard
() H Public Health () M Marine) R Regular) V Reserves
() N Navy () O NOAA () P Family Member	1n. Drivers Lic. Numb	er:		1) Foreign	() International () State
() Q Civil Service	2a. Organization, UIC	And Street Address:		Other (Specify): 2b. Installation/	'Citv:		2d, Zip/APO:
(X)R Civilian ()S Contractor		D FORCES RECREATION		APO			09053
() T Other Gov. Empl. () U Foreign Nat'l Empl.				2c. State/Coun	try.		2e. Unit Phone:
() V Other Foreign Nat! () W Relired Military	3a. Residence Street	Address:		3b. Installation/ GARMISCH	City:		3d. Zip/APO: 09053
	ABRAMS COMPLEX	RM #134		3c State/Coun	try:		1 00000
4a. DD Form 2701 Provided	Witness: (X) Yes	() No			d, Why Not?	() Declined () Not Required
		Additional Perso	ns Palatad	To Penort			
1a. Person Related	tb, Status:) Complaint		n/ Police	() Spensor	/ ¥ \\A/itmc==
To Report Number: 1c. Name (Last, First, Middle	1	() Civil Admonties (() Sponsor hlp: (X) US ((X)Witness) Resident Alien
PERRY, LANCE DANIEL 1f. Category:): 1h. POB: City, State, Cou				y (Specify):	·
() A Army () C Coast Guard	Ig. DOB (111 Million)	LEWISTON, ID US	iiuy.		NA-3	ij. Home Phone:	1k. Work Phone.
() F Air Force	11. Nicknames/Alias:) G Nat'i Guard) R Regular
() H Public Health () M Marine) V Reserves
() N Navy () O NOAA () P Family Member	1n. Drivers Lic. Number	r: .		1o. is License (Other (Specify):) Foreign	() International () State
() Q Civil Service (X) R Civilian	2a. Organization, UIC,	And Street Address:		2b. Installation/	City:		2d. Zip/APO:
() S Contractor () T Other Gov. Empl.	W4RH01 ARME	D FORCES RECREATION		APO 2c. State/Count	ry:		2e Unit Phone:
() U Foreign Nat'l Empl. () V Other Foreign Nat'l	3a. Residence Street A	ddroon:		AE 3b. installation/	Cibe		3d Zip/APO:
() W Retired Military		uu/633.		CHIEMSEE			09098
	WAIDHEIM RM#419			3c. State/Count GE	ry:		
4a. DD Form 2701 Provided	Witness: (X)Yes	() No		4b. If Not Provide	d, Why Not?	() Declined () Not Required
	Plea	m is a continuation on use attach it to DA Fo use of this form see AR 190-45	rm 3975 wi	nen complet	ed.		
PRINCIPAL PURPOSE: T ROUTINE USES: Y	o provide commanders and	PRIVACY ACT cection 301; Title 5 United State law enforcement officials with r is used as an additional/alterneurity Number is voluntary.	s Code Section : neans by which i	2951; Executive C nformation may b	e accurately lo	ientified	3 (5SN).
DA EODM 2075 A DEC 401					D.	age 2 of 10	

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·		Se	ction V - Additiona	l Persons R	elated To Re	port		
1a. Person Related To Report Number:	4	1b. Status.) Civil Authorities	(X) Complain	nt () Mills	Police	() Sponsor	()Witness
1c. Name (Last, First, Middle STEWART, SHANE KEIT		, Sr., III):		1d. SSN/FN	N/Alien Reg No:	1e. Citizeni	ship: (X)US (try (Specify): US	
1f. Category: () A Army () C Coast Guard			1h. POB: City, State, Co ANDERSON, IN US	ountry:		1i. Grade NA-3	1j. Home Phone: 01712360507	1k. Work Phone:
() F Air Force () H Public Health () M Marine	11. Nickni	ames/Allas:) G Nat'l Guard) R Regular) V Reserves
() N Navy () O NOAA () P Family Member	1n. Drive	rs Lic. Number	·		1c. is License (Other (Specify):) Foreign	() International () State
() Q Civil Service () R Civilian () S Contractor	2a. Organ W4RH0		And Street Address: D FORCES RECREATIO	N	2b. Installation/			2d. Zip/APO: 09053
() T Other Gov. Empl. () U Foreign Nat'l Empl. () V Other Foreign Nat'l		ence Street Ad			2c. State/Coun AE 3b. Installation/			2e. Unit Phone:
() W Retired Military	AFRC GA	ARMISCH			UNIT 24501 A 3c. State/Count AE	APO		09053
4a. DD Form 2701 Provided	Witness: () Yes (X) No		 	ed, Why Not?	() Declined () Not Required
			Additional Perso	ns Related	To Report			
1a. Person Related To Report Number:	,	1b. Status;	() Civil Authorities	() Complaint	(X)Milita	ry Police	() Sponsor	()Witness
1c. Name (Last, First, Middle PURSER, SCOT MELTON		, Sr., III):		1d. SSN/FNN	I/Alien Reg No:		hip: (X)US (ry (Specify):) Resident Alien
1f. Category: (X) A Army		(פס/אואא/סם):	1h. POB: City, State, Co	-		1i. Grade	1j Home Phone:	1k Work Phone:
() C Coast Guard () F Air Force () H Public Health () M Marine	1l. Nickna	mes/Allas:	OKLAHOMA CITY, O	K US		E-4		440-2801) G Nat'l Guard) R Regular) V Reserves
() N Navy () O NOAA () P Family Member	1n. Driver	s Lic. Number:	and the state of t		1c. is License (Other (Specify):) Foreign	() International () State
() Q Civil Service () R Civilian () S Contractor	2a. Organ WCAX0		nd Street Address:		2b. Installation/GAPO 2c. State/Count			2d. Zip/APO: 09131
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() W Retired Military	AST-GAR	MISCH			APO 3c. State/Count AE	ry'		09053
4a. DD Form 2701 Provided V	Vitness: () Yes {	X) No			d, Why Not?	() Declined (X)	Not Required
		Pleas	n is a continuation se attach it to DA Fo se of this form see AR 190-4	orm 3975 wl	nen complet	ed.		
PRINCIPAL PURPOSE: To ROUTINE USES: You	provide com ur Social Se	nmanders and la curity Number is	PRIVACY AC ction 301; Title 5 United Stat w enforcement officials with used as an additional/altern tity Number is voluntary.	means by which I	2951; Executive O	e accurately is	dentified	3 (SSN).
DA FORM 3975-4, DEC 1998	<u> </u>					Pa	age of 10	Pages

a. Person Related o Report Number: 6		1b. Status.) Civil Authorities () Complaint	(X)Mili	Police	() Sponsor	()Witness
c. Name (Last, First, Middle CLARK, RANDY NMN	Name, JR	., Sr., III):		1d. SSN/FNN	Alien Reg No		thip: (X)US (ry (Specify): US	
f. Category: X) A Army) C Coast Guard) F Air Force) H Public Health) M Marine	_	(YYYY/MM/DD): ames/Alias:	1h. POB: City, State, Cour DAYTON, OH US	ntry:		1i. Grade E-6	1j. Home Phone: 440-2827 1m. Component: (1k. Work Phone 440-2827
) N Nevy) O NOAA	1n. Drive	rs Lic. Number:) Foreign	() International () State
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) V Other Foreign Nat'l) W Retired Military	3a. Resid	ience Street Add	dress.		3b. Installation	·		3d. Zip/APO:
a. DD Form 2701 Provided V	Vitness: (() Yes (X) No				() Declined (X) Not Required
	VIII.1000.		Additional Person				(X	
a. Person Related o Report Number;		1b. Status: () Civil Authorities () Complaint	() Milita	ry Police	() Sponsor	()Witness
c. Name (Last, First, Middle	Name, JR	, Sr , III):		1d. SSN/FNN/		1e. Citizensi	hip: () US (y (Specify):) Resident Allen
f. Category:) A Army	1g. DOB	(YYYY/MM/DD):	1h. POB ⁻ City, State, Coun	ntry:			1j. Home Phone:	1k. Work Phone
) C Coast Guard) F Air Force) H Public Health) M Marine	1l. Nickna	mes/Alias:) G Nat'l Guard) R Regular) V Reserves
) N Navy) O NOAA) P Family Member	1n. Driver	rs Lic. Number:			Other (Specify):		() International (
) Q Civil Service) R Civilian) S Contractor	2a. Organization, UIC, And Street Address				2b. Installation/			2d. Zip/APO:
) T Other Gov. Empl.) U Foreign Nat'l Empl.) V Other Foreign Nat'l		20			2c. State/Coun			2e. Unit Phone:
) W Retired Military	Ja. Kesid	ence Street Add	iress.		3b. Installation/ 3c. State/Coun			3d. Zip/APO.
a. DD Form 2701 Provided V	Vitage /	\Ven /) No		th If Not Provide	od Mhy Not2	() Declined (\ Not Required
	,	This form	is a continuation of e attach it to DA For e of this form see AR 190-45;	rm 3975 wh	en comple	ted.		
PRINCIPAL PURPOSE: To ROUTINE USES: You	provide con ur Social Se	nmanders and lav curity Number is	PRIVACY ACT tion 301; Title 5 United States v enforcement officials with m used as an additional/alternat ty Number is voluntary.	Code Section 2	formation may b	e accurately id	lentified	3 (SSN)

Property Ownership: () A Federal () B State () C City () D Country/Borough () E Foreign Govt. (Description () A Federal () B State () C City () D Country/Borough () E Foreign Govt. () A Double Foreign Govt. () A Double Foreign Govt. () B State () A Double Foreign Govt. () B State () C City () D Country/Borough () E Foreign Govt. () Property Ownership: () A Federal () B State () C City () D Country/Borough () E Foreign Govt. () Property Loss Type (Check All That Apply): () 1 None () 2 Burned () 3 Counterfeited/Forged () 4 Di) 5 Recovered () 6 Seized () 7 Stolen	1f. Serial Number Secured () U Unsacured () Z Unknown) F Private () U Unknown Inmaged/Destroyed/Vandalized 1f. Serial Number Secured () U Unsacured () Z Unknown) F Private () U Unknown amaged/Destroyed/Vandalized
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Property Description Code Table	
1 Aircraft 12 Farm Equipment 23 Office-Type Equipment	34 Structures-Storage
2 Alcohol 13 Firearms 24 Other Motor Vehicles	35 Structures-Other
3 Automobile 14 Gambling Equipment 25 Purse/Handbag/Wallet	36 Tools/Hand and Power
4 Bicycle 15 Heavy Construction Equipment 26 Radio/TV/VCR	37 Trucks
5 Buses 16 Household Goods 27 Audio/Visual Recording	38 Vehicle Parts/Accessories
6 ClothIng/Furs 17 Jewelry/Precious Metals 28 Recreational Vehicle 7 Computer Hardware/Software 18 Livestock 29 Structure-Single Occupancy	39 Watercraft
7 Computer Hardware/Software 18 Livestock 29 Structure-Single Occupancy 3 Consumable Goods 19 Merchandise 30 Structures-Other-Dwellings	40 Other (Specify):
30 Structures-Other-Dwellings 31 Structures-Commercial/Business	
D Drugs/Narcotics (See Below) 21 Negotiable Instruments 32 Structures-industry/Manufacturing	41 Pending Inventory
Drugs/Narcotics Equipment 22 Non-Negotiable Instruments 33 Structures-Public/Community	42 Special Category
rug/Narcotic Measures: GM-Gram KG-Kliogram OZ-Ounce LB-Pound FO-Fluid Ounce GL-Galton LT-Liter ML-Milliliter DU-D	osage Unit NP-Number of Plants
Section VII - Narrative	
ESULT OF 0.03% PROMILLE. THIS CASE WAS COORDINATED WITH SJA (CPT DENNIS) WHO OPIN UFFICIENT EVIDENCE TO TITLE CONLEY, EDWARDS AND LARSON WITH THE ABOVE OFFENSE.	
REVIOUS OFFENSE(S): 0 (NONE) AT THIS STATION.	
UBJECT # 3: UBJECT # 3:	
REVIOUS OFFENSE(S): 0 (NONE) AT THIS STATION.	
P REPORTS ARE EXEMPT FROM AUTOMATIC DISCLOSURE IAW THE PRIVACY ACT AND THE FREEDOM	OF INFORMATION ACT.
HIS IS A FINAL REPORT	•
HIS IS A FINAL REPORT.	•
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Enclosures: 2. Distribution: 3. Name:	4. Gr
Enclosures: 2. Distribution: 3. Name:	Gra
Enclosures: 2, Distribution: 3, Name: NLEY, N 1-AFRC 1920, DA 3881, DA 2823, INFORMATION 1-CRC RONALD S. COX	Gra SFC
Enclosures: 2. Distribution: 3. Name: NLEY, N 1-AFRC 1-CRC RONALD S. COX	Gra SFC
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Enclosures: NLEY, N 1-AFRC 1920, DA 3881, DA 2823, INFORMATION RONALD S. COX 7-FILE 1-SION, J 3. Name: RONALD S. COX RONALD S. COX 5. Title Of Reporting the station commans of the station command of the station commans of the station command	Green Second Green Second Green Gree
HROWING SNOWBALLS AT CONLEY. GARMISCH POLIZEI WERE NOTIFIED BUT DECLINED INVESTIG DMINISTERED A B.A.T. WHICH RESULTED IN A 0.7% PROMILLE READING. LARSON WAS ADMINISTED STATEMENT OF 0.03% PROMILLE. THIS CASE WAS COORDINATED WITH SJA (CPT DENNIS) WHO OPIN UFFICIENT EVIDENCE TO TITLE CONLEY, EDWARDS AND LARSON WITH THE ABOVE OFFENSE. UBJECT # 1: REVIOUS OFFENSE(S): 0 (NONE) AT THIS STATION. UBJECT # 2: REVIOUS OFFENSE(S): 0 (NONE) AT THIS STATION.	G LARSON'S FRONT TOOTH. , LARSON AND EDWARDS WERE THEY WAIVED. CONLEY NDERED A WRITTEN SWORN EDWARDS ALSO ADMITTED AATION. CONLEY WAS TERED A B.A.T. WITH A

M6/11/2007 10:07 17404528932 BECO PAGE 16 13 Section VI - Namative (Continued) Enclosures (Continued) DA 2823, INFORMATION WORKSHEET DA 2823, INFORMATION WORKSHEET DA 2823, DA FM 3881, INFORMATION WORKSHEET DA 2823 DA 2823 5 of 10 MAND FOR USE ONLY BY YOUR AGENCY